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MEMORANDUM

To: Iowa Commission on Aging

FROM: Deanna Clingan-Fischer, State Long-Term Care Ombudsman

SUBJECT: Long-Term Care Ombudsman Updates

DATE: August 10, 2015

The Office of the State Long-Term Care Ombudsman is reviewing, monitoring and working to implement several federal regulations. Those regulations relate to:

- 1. Long Term Care Ombudsman Program. Final Rule by AoA. The Administration on Aging of the Administration for Community Living has issued final regulations in order to implement the provision of the Older American's Act regarding states' long-term care ombudsman programs. Since its creation in the 1970s, the function of the Long-Term Care Ombudsman has been delineated in the Act; however, regulation that focused on the states' implementation of the program had not been promulgated. In the absence of regulation, there has been significant variation in the interpretation and actual implementation of these provisions among states. The effective date of these regulations is July 1, 2016. (The proposed rule was published in June 2013). 45 CFR 1321 and 1327.
- 2. Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities. Proposed Rule by CMS. This rule would revise the requirements that long-term care facilities must meet to participate in the Medicare and Medicaid programs. These proposed changes are necessary to reflect the substantial advances that have been made over the past several years in the theory and practice of service delivery and safety. These proposals are also an integral part of CMS's effort to achieve broad-based improvements both in the quality of health care furnished and resident safety. 42 CFR 405, 431, et seq.
- 3. Medicaid Managed Care. Proposed Rule by CMS. This rule would modernize the Medicaid managed care regulations to reflect changes in the usage of managed care delivery systems. The proposed rule would align the rules governing Medicaid managed care with those of other major sources of coverage, including coverage through Qualified Health plans and Medicare Advantage plans, implement statutory provisions; strengthen actuarial soundness payment provisions; and promote the quality of care and strengthen efforts to reform delivery systems that service Medicaid and Children's Health Insurance Programs (CHIP). This rule would ensure appropriate beneficiary protections and enhance policies related to program integrity and require states' to establish quality strategies. 42 CFR 431, 433, et seq.